

Docket No.: 42390.P8723

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Dyrga, et al.

Application No.: 09/608,773

Filed: June 30, 2000

For: RESILIENT CHASSIS-BASED

NETWORK SWITCHING

Examiner: D. Odland

Art Group: 2662

RECEIVED

MAR 1 5 2003

Technology Center 2600

AMENDMENT AND RESPONSE TO THE OFFICE ACTION

MAIL STOP NON-FEE AMENDMENT Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

In response to the outstanding Office Action, mailed December 10, 2003, please enter the following amendments and consider the following remarks.

Amendments to the Claims are reflected in the listing of claims which begins on page 2. Remarks begin on page 7.

HAR 1 2004 SOLE

()

				-				
TRANSMITTAL FORM (to be used for all correspondence after initial filing)			Application No.	09/60				
			Filing Date	June 3	June 30, 2000			
			First Named Inventor	Rysza	rd W. Dyrga	RECEI	YED	
			Art Unit	2662		MAR 1 5	2003	
,			Examiner Name	D. Od	D. Odland			
Total Number of Pages in T	Attorney Docket Number	42390	42390P8723 Technology					
	ENCLOSU	RES (chec	k all that apply)					
Fee Transmittal Form		Drawing(s)			After Allowand o Group	e Communication		
Fee Attached		Licensing-r	related Papers		Appeal Communication to Board of Appeals and Interferences			
Amendment / Response		Petition			Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)			
After Final Affidavits/declaration(s)		Petition to Convert a Provisional Application			Proprietary Information			
Extension of Time Request		Power of Attorney, Revocation Change of Correspondence Address			Status Letter			
Express Abandonment Request		Terminal Disclaimer			Other Enclosure(s) (please identify below):			
Information Disclosure Statement		Request for Refund			- return postcard			
PTO/SB/08		CD, Number of CD(s)						
Certified Copy of Priority Document(s)								
Response to Missing Parts/ Incomplete Application Basic Filing Fee Declaration/POA		emarks						
Response to Missing Parts under 37 CFR 1.52 or 1.53								
	SIGNATURE O	F APPLICA	NT, ATTORNEY, OR A	GENT				
	Lisa Tom, Reg. No. 52,291							
or Individual name BLA	BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP							
Signature	Lie m							
Date March 8, 2004								
I hereby certify that this corresp sufficient postage as first class Box 1450, Alexandria, VA 2231	ondence is being mail in an envelo	deposited wit	LING/TRANSMISSION h the United States Posta to: Mail Stop Non-Fee Ar	l Service o	on the date sh , Commission	own below with er for Patents, P.O.		
	nnie G. Pearso	on	<u> </u>		- ·		1	
Signature	min O K	Res			March 8, 2004			

RECEIVED

MAR 1 5 2003

03/08/04

Date

Technology Center 2600 FEE TRANSMITTAL for FY 2004 Complete if Known Application Number 09/608,773 Filing Date June 30, 2000 Effective 01/01/2004. Patent fees are subject to annual revision. First Named Inventor Ryszard W. Dyrga Examiner Name D. Odland Applicant claims small entity status. See 37 CFR 1.27. 2662 42390P872 Art Unit TOTAL AMOUNT OF PAYMENT

TOTAL AIRO		(Ψ) 0.	.00	Attorney L	Jocket	INO.	4239	JP8723		
METHOD O	FEE CALCULATION (continued)									
	3. ADDITIONAL FEES									
Check Credit card Money Other None						I Entity	Entity			
Deposit Account			Fee		Fee	Fee	-			
Deposit	00.0666		Code		Code	(\$)	Fee	Description		Fee Paid
Account Number			1051	130	2051	65	Surcharge - late filing	fee or oath		
Deposit			1052	2 50	2052	25	Surcharge - late provide cover sheet.	sional filing fee or		
Account Name Blakely, Sokoloff, Taylor & Zafman LLP			2053	130	2053	130	Non-English specifica	tion		
The Commissioner is authorized to: (check all that apply)			1812		1812	2,520	For filing a request for		ation	
Charge fee(s) indicated below Credit any overpayments			1804	920*	1804	920 *	Requesting publication	n of SIR prior to		
							Examiner action			<u> </u>
Charge any additional fee(s) or underpayment of fees as required under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.			1805	5 1,840°	1805	1,840	Requesting publication Examiner action	n of SIH after		
Charge fee(s) indicated below, except for the filling fee to the above-identified deposit account			1251	110	2251	55	Extension for reply wit	hin first month		
FEE CALCULATION			1252		2252	210	Extension for reply within second month			
1. BASIC FIL			1253		2253	475	Extension for reply within third month			
1	ad Entity		1254	1,480	2254	740	Extension for reply wit	hin fourth month		
Fee Fee Fee	Fee Fee Description	Fee Paid	1255	1,210	2255	605	Extension for reply wit	hin fifth month		
Code (\$) Cod			1404	330	2401	1 6 5	Notice of Appeal			
1001 770 200			1402	330	2402	165	Filing a brief in suppor	rt of an appeal		
1002 340 200			1403	290	2403	145	Request for oral heari	ng		
1003 530 200 1004 770 200			1451	1,510	2451	1,510	Petition to institute a p	ublic use proceedi	ng	
1005 160 200		, 	1452	110	2452	55	Petition to revive - una	avoidable		
1005 100 200	_		1453	1,330	2453	665	Petition to revive - uni	ntentional		
	SUBTOTAL (1)	(\$)	1501	1,330	2501	665	Utility issue fee (or rei	ssue)		
2. EXTRA CLAIM FEES Extra Fee from		1502	2 480	2502	240	Design issue fee				
		below Fee Paid	1503	640	2503	320	Plant issue fee			
Total Claims	_ 20 _ X	=	1460	130	2460	130	Petitions to the Comm	nissioner		
Independent Claims	. 3 = X	=	1807	7 50	1807	50	Processing fee under	37 CFR 1.17(q)		
Multiple Dependent			1806	180	1806	180	Submission of Informa	ation Disclosure St	mt	
Large Entity Sm	all Entity		8021	1 40	8021	40	Recording each pater property (times number			
Fee Fee Fee Code (\$) Cod	Fee Fee Description									
		0	1809	770	1809	385	Filing a submission aft (37 CFR § 1.129(a))	er marrejection		
1202 18 220 1201 86 220	_	9 Claims in excess of 20		770	2810	385	For each additional in			
1201 86 220				l			examined (37 CFR § 1			
1204 86 220	43 **Reissue independent claims over original		1801	770	2801		Request for Continued Examination (RCE)			
i _	patent		1802 900 1802		900	900 Request for expedited examination of a design application				
1205 18 2205 9 **Reissue claims in excess of 20 and over original patent			Other fee (specify)			Resp	Response to Office Action 0.00			
										Ц——
SUBTOTAL (2) (\$)			*Reduced by Basic Filing Fee Paid			1	SUBTOTAL (3)			0.00
"or number previously paid, if greater, For Reissues, see below										
SUBMITTED BY				Registration No.			Complete (if applicable)			
Name (Print/Type) Lisa Tom				(Attorney/Agent)			52,291 Telephone (503) ((503) 684	4-6200

Signature